

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name	
	Blake		Fitzgerald	
Debtor 2	(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA				
Case number (if known)	<u>16-30351</u>			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$39,206.25
1c. Copy line 63, Total of all property on Schedule A/B.....	\$39,206.25

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	\$47,764.41
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3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$2,001.00
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3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$87,728.48
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Your total liabilities

\$137,493.89

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	\$6,127.50
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5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	\$5,149.00
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Debtor 1 **Blake**
First Name **Fitzgerald**
Middle Name
Last Name

Case number (if known) **16-30351**

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$7,786.14

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	\$1.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$2,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$1,848.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$3,849.00

Fill in this information to identify your case and this filing:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... → \$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1.

Make: **Honda**

Who has an interest in the property?

Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Unknown

Current value of the portion you own?

Unknown

Other information:

**Leased 2012 Honda Odyssey (approx. 117000 miles)
NADA \$18,950**

Check if this is community property
(see instructions)

3.2.

Make: **Chevrolet**

Who has an interest in the property?

Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Unknown

Current value of the portion you own?

Unknown

Other information:

**Leased 2011 Chevrolet Cruze (approx. 70000 miles)
NADA \$9,400**

Check if this is community property
(see instructions)

Debtor 1	Blake First Name	Fitzgerald Middle Name	Last Name	Case number (if known)	16-30351
3.3.	Who has an interest in the property? Check one.			Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make:	<input checked="" type="checkbox"/> Debtor 1 only				
Model:	<input type="checkbox"/> Debtor 2 only				
Year:	<input type="checkbox"/> Debtor 1 and Debtor 2 only				
Approximate mileage:	<input type="checkbox"/> At least one of the debtors and another				
Other information:	<input type="checkbox"/> Check if this is community property (see instructions)			\$7,300.00	\$7,300.00

**2002 Cadillac Escalade SUV (approx. 165000 miles)
NADA \$7,300**

3.4.	Who has an interest in the property? Check one.			Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make:	<input checked="" type="checkbox"/> Debtor 1 only				
Model:	<input type="checkbox"/> Debtor 2 only				
Year:	<input type="checkbox"/> Debtor 1 and Debtor 2 only				
Approximate mileage:	<input type="checkbox"/> At least one of the debtors and another				

**2008 Honda Accord LX-P (approx. 140,000 miles)
NADA \$7,625**

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... → **\$14,925.00**

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No
 Yes. Describe..... **See continuation page(s).** **\$2,450.00**

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No
 Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No
 Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No
 Yes. Describe.....

Debtor 1	Blake First Name	Fitzgerald Middle Name	Last Name	Case number (if known) 16-30351
10. Firearms	<i>Examples:</i> Pistols, rifles, shotguns, ammunition, and related equipment			
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Describe.....				_____
11. Clothes	<i>Examples:</i> Everyday clothes, furs, leather coats, designer wear, shoes, accessories			
<input type="checkbox"/> No				
<input checked="" type="checkbox"/> Yes. Describe..... Wearing Apparel Including: Clothes, Shoes & Accessories				\$1,100.00
12. Jewelry	<i>Examples:</i> Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver			
<input type="checkbox"/> No				
<input checked="" type="checkbox"/> Yes. Describe..... Jewelry Including: Wedding Rings, Watches				\$650.00
13. Non-farm animals	<i>Examples:</i> Dogs, cats, birds, horses			
<input type="checkbox"/> No				
<input checked="" type="checkbox"/> Yes. Describe..... Pets: Parrot, Dog				\$2.00
14. Any other personal and household items you did not already list, including any health aids you did not list				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Give specific information.....				_____
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....	→	\$4,202.00		
Part 4: Describe Your Financial Assets				
Do you own or have any legal or equitable interest in any of the following?				Current value of the portion you own?
				Do not deduct secured claims or exemptions.
16. Cash	<i>Examples:</i> Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition			
<input type="checkbox"/> No				
<input checked="" type="checkbox"/> Yes.....				Cash: \$150.00
17. Deposits of money	<i>Examples:</i> Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.			
<input type="checkbox"/> No				
<input checked="" type="checkbox"/> Yes.....				Institution name:
17.1. Checking account: Gate City Checking Account #9080				\$158.00
18. Bonds, mutual funds, or publicly traded stocks	<i>Examples:</i> Bond funds, investment accounts with brokerage firms, money market accounts			
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes.....				Institution or issuer name:

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No
 Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No
 Yes. Give specific information about them.....

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No
 Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No
 Yes..... Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

No
 Yes..... Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No
 Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No
 Yes. Give specific information about them

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No
 Yes. Give specific information about them

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No
 Yes. Give specific information about them

Debtor 1 **Blake Fitzgerald** Case number (if known) **16-30351**

First Name Middle Name Last Name

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: **\$0.00**
 State: **\$0.00**
 Local: **\$0.00**

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No
 Yes. Give specific information

Alimony: **\$0.00**
 Maintenance: **\$0.00**
 Support: **\$0.00**
 Divorce settlement: **\$0.00**
 Property settlement: **\$0.00**

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No
 Yes. Give specific information **Garnishment** **\$3,676.25**

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No
 Yes. Name the insurance company of each policy and list its value..... Company name: Beneficiary: Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No
 Yes. Give specific information _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim..... _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim..... _____

35. Any financial assets you did not already list

No
 Yes. Give specific information _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$3,984.25

Debtor 1 **Blake Fitzgerald** Case number (if known) **16-30351**
First Name Middle Name Last Name

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.
 Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

No
 Yes. Describe.. **Commission** **\$14,000.00**

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No
 Yes. Describe..

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
 Yes. Describe..

41. Inventory

No
 Yes. Describe..

42. Interests in partnerships or joint ventures

No
 Yes. Describe..... Name of entity: % of ownership:

43. Customer lists, mailing lists, or other compilations

No
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
 No
 Yes. Describe.....

44. Any business-related property you did not already list

No
 Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here. → **\$14,000.00**

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No
 Yes....

48. Crops--either growing or harvested

No
 Yes. Give specific information.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No
 Yes....

50. Farm and fishing supplies, chemicals, and feed

No
 Yes....

51. Any farm- and commercial fishing-related property you did not already list

No
 Yes. Give specific information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... → \$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.

Landlord Security Deposit \$1,595.00

Bedroom Furnishings Including: Dresser, Nightstand (2), Bed (1), Mirror (1) \$500.00

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → \$2,095.00

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... → \$0.00

56. Part 2: Total vehicles, line 5 \$14,925.00

57. Part 3: Total personal and household items, line 15 \$4,202.00

58. Part 4: Total financial assets, line 36 \$3,984.25

59. Part 5: Total business-related property, line 45 \$14,000.00

60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

61. Part 7: Total other property not listed, line 54 + \$2,095.00

62. Total personal property. Add lines 56 through 61..... \$39,206.25 Copy personal property total → + \$39,206.25

63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$39,206.25

Debtor 1 Blake _____ Case number (if known) 16-30351
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6. Household goods and furnishings (details):

Livingroom Furnishings Including: Television (2), Stereo Receiver (1), DVD Player (2), Speakers (5), Computer Equipment (2) \$1,800.00

Diningroom Furnishings Including: Dinner Table, Dinner Chairs \$400.00

Kitchen Furnishings Including: Cookware, Dishes, Silverware \$250.00

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
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Brief description:	<u>\$7,300.00</u>	<input checked="" type="checkbox"/> <u>\$2,950.00</u>	N.D. Cent. Code § 28-22-03.1(2)
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2002 Cadillac Escalade SUV (approx.
165000 miles)
NADA \$7,300
(1st exemption claimed for this asset)

Line from *Schedule A/B*: 3.3

100% of fair market value, up to any applicable statutory limit

Brief description:	<u>\$7,300.00</u>	<input checked="" type="checkbox"/> <u>\$4,350.00</u>	N.D. Cent. Code § 28-22-03.1(1)
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2002 Cadillac Escalade SUV (approx.
165000 miles)
NADA \$7,300
(2nd exemption claimed for this asset)

Line from *Schedule A/B*: 3.3

100% of fair market value, up to any applicable statutory limit

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1 **Blake Fitzgerald** Case number (if known) 16-30351
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption
Brief description: 2008 Honda Accord LX-P (approx. 140000 miles)	<u>\$7,625.00</u>	<input checked="" type="checkbox"/> \$3,150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03.1(1)
2008 Honda Accord LX-P (approx. 140,000 miles) NADA \$7,625 (1st exemption claimed for this asset)			
Line from <i>Schedule A/B</i> : <u>3.4</u>			
Brief description: 2008 Honda Accord LX-P (approx. 140000 miles)	<u>\$7,625.00</u>	<input checked="" type="checkbox"/> \$320.77 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
2008 Honda Accord LX-P (approx. 140,000 miles) NADA \$7,625 (2nd exemption claimed for this asset)			
Line from <i>Schedule A/B</i> : <u>3.4</u>			
Brief description: Livingroom Furnishings Including: Television (2), Stereo Receiver (1), DVD Player (2), Speakers (5), Computer Equipment (2)	<u>\$1,800.00</u>	<input checked="" type="checkbox"/> \$1,800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Diningroom Furnishings Including: Dinner Table, Dinner Chairs	<u>\$400.00</u>	<input checked="" type="checkbox"/> \$400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Kitchen Furnishings Including: Cookware, Dishes, Silverware	<u>\$250.00</u>	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Wearing Apparel Including: Clothes, Shoes & Accessories	<u>\$1,100.00</u>	<input checked="" type="checkbox"/> \$1,100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-02 (5)
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: Jewelry Including: Wedding Rings, Watches	<u>\$650.00</u>	<input checked="" type="checkbox"/> \$650.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from <i>Schedule A/B</i> : <u>12</u>			

Debtor 1 **Blake Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: Pets: Parrot, Dog	Copy the value from Schedule A/B \$2.00	<input checked="" type="checkbox"/> \$2.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from Schedule A/B: 13			
Brief description: Cash on Hand	\$150.00	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from Schedule A/B: 16			
Brief description: Gate City Checking Account #9080	\$158.00	<input checked="" type="checkbox"/> \$158.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from Schedule A/B: 17.1			
Brief description: Garnishment	\$3,676.25	<input checked="" type="checkbox"/> \$3,676.25 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from Schedule A/B: 30			
Brief description: Commission	\$14,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	PROPERTY NOT EXEMPT
Line from Schedule A/B: 38			
Brief description: Landlord Security Deposit	\$1,595.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	PROPERTY NOT EXEMPT
Line from Schedule A/B: 53			
Brief description: Bedroom Furnishings Including: Dresser, Nightstand (2), Bed (1), Mirror (1) (1st exemption claimed for this asset)	\$500.00	<input checked="" type="checkbox"/> \$92.98 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03
Line from Schedule A/B: 53			
Brief description: Bedroom Furnishings Including: Dresser, Nightstand (2), Bed (1), Mirror (1) (2nd exemption claimed for this asset)	\$500.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.D. Cent. Code § 28-22-03.1(1)
Line from Schedule A/B: 53			

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2	(Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---	--	--

2.1	Describe the property that secures the claim:	\$11,527.00	\$0.00	\$11,527.00
Ally Creditor's name P.O. Box 380901 Number Street	Leased Chevrolet Cruze			

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset)

Vehicle Loan

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates
to a community debt

Date debt was incurred 2/15/2011 Last 4 digits of account number 1 6 5 5

Add the dollar value of your entries in Column A on this page. Write that number here:

\$11,527.00

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
 First Name Middle Name Last Name

Additional Page

Part 1: After listing any entries on this page, number them sequentially from the previous page.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion If any

2.2 Describe the property that secures the claim: \$32,083.18 \$0.00 \$32,083.18

American Honda Finance Corp

Creditor's name

3625 W Royal Ln, Ste 100

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Leased Van

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred 8/24/2012

Last 4 digits of account number

5 6 6 9

Original Claim amount \$32033.00

2.3

Describe the property that secures the claim:

\$4,154.23

\$7,625.00

Gate City Bank

Creditor's name

500 2nd Ave N

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Agreement

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred 5/27/2012

Last 4 digits of account number

5 3 5 9

Add the dollar value of your entries in Column A on this page. Write that number here:

\$36,237.41

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$47,764.41

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority amount	Nonpriority amount
\$2,000.00	\$2,000.00	\$0.00

2.1

Internal Revenue Service

Priority Creditor's Name

Centralized Insolvency Operations

Number Street

PO Box 7346

Last 4 digits of account number

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Philadelphia PA 19101-7346

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.2	\$1.00	\$1.00	\$0.00
-----	--------	--------	--------

Megan Gerszewski

Priority Creditor's Name

209 2nd Ave

Number Street

Last 4 digits of account number

When was the debt incurred?

Viking **MN** **56760**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1	\$98.00
<p>7 Day Clinic Nonpriority Creditor's Name 1120 28th Ave N. Number Street</p> <p>Fargo ND 58102 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Medical Bills</p>	
4.2	\$13,067.00
<p>Aaland Law (Attorney Gehrig) Nonpriority Creditor's Name 415 11th St S Number Street</p> <p>Fargo ND 58103 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Attorney Fees (Custody)</p>	

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3 **\$2,000.00**

Aaland Law (Attorney Hopper)
 Nonpriority Creditor's Name
415 11th St S
 Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Fargo **ND** **58103**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Attorney Fees (Criminal)**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.4 **\$18,691.08**

Affinity Plus Federal Credit Union
 Nonpriority Creditor's Name
175 Lafayette Rd
 Number Street

Last 4 digits of account number **2 7 4 4**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Saint Paul **MN** **55107**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Debt**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.5 **\$80.00**

Altru Health Systems Clinic
 Nonpriority Creditor's Name
PO Box 13780
 Number Street

Last 4 digits of account number **5 5 5 2**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Grand Forks **ND** **58206-6003**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical Bills**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.6 **\$139.00**

Brenda Barfield, DDS
 Nonpriority Creditor's Name
2701 9th Ave
 Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Fargo **ND** **58103**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Debt**

Is the claim subject to offset?

- No
- Yes

4.7 **\$1,915.77**

Brookstone Property LLC
 Nonpriority Creditor's Name
1153 43rd Ave W
 Number Street

Last 4 digits of account number **0 9 2 3**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

West Fargo **ND** **58078**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Judgment**

Is the claim subject to offset?

- No
- Yes

4.8 **\$562.00**

Buckle/ World Financial Network Bank
 Nonpriority Creditor's Name
3100 Easton Square Place
 Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Columbus **OH** **43219**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.9 **\$383.00**

Cable One

Nonpriority Creditor's Name
1314 North 3rd St
 Number Street

City **Phoenix** State **AZ** ZIP Code **85004**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Last 4 digits of account number **6 0 9 9**

When was the debt incurred? **7/29/2004**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Cable TV

Is the claim subject to offset?

No
 Yes

4.10 **\$3,928.00**

Capital One

Nonpriority Creditor's Name
PO Box 30285
 Number Street

City **Salt Lake City** State **UT** ZIP Code **84130**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Last 4 digits of account number **6 0 9 9**

When was the debt incurred? **7/29/2004**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Card

Is the claim subject to offset?

No
 Yes

4.11 **\$800.00**

Cass County Court

Nonpriority Creditor's Name
211 S. 9th St.
 Number Street

City **Fargo** State **ND** ZIP Code **58103**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Last 4 digits of account number **6 0 9 9**

When was the debt incurred? **7/29/2004**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Court fees

Is the claim subject to offset?

No
 Yes

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.12 **\$111.00**

Cass County Electric Coop
 Nonpriority Creditor's Name
4100 32nd Ave S
 Number Street

Last 4 digits of account number **1 1 1**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Fargo **ND** **58104**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Utilities**

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.13 **\$7,999.61**

Chad & Jaquelyn Gibbon
 Nonpriority Creditor's Name
522 Arrowwood Dr
 Number Street

Last 4 digits of account number **0 4 5 8**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Horace **ND** **58047**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Judgment**

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.14 **\$3,109.00**

Citibank
 Nonpriority Creditor's Name
PO Box 6062
 Number Street

Last 4 digits of account number **— — — —**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Sioux Falls **SD** **57117**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.15

\$249.00

City of Fargo
 Nonpriority Creditor's Name
PO Box 1066
 Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Fargo **ND** **58107**
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Utilities**

4.16

\$442.60

City of Horace
 Nonpriority Creditor's Name
215 Park Dr E
 Number Street
Horace, ND 580407

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City **State** **ZIP Code**
Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Utilities**

4.17

\$585.00

Clay County Court
 Nonpriority Creditor's Name
807 11th St N
 Number Street

Last 4 digits of account number **4 0 9 5**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Moorhead **MN** **56560**
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Judgment**

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.18

\$8,482.00

Gate City Bank
 Nonpriority Creditor's Name
500 2nd Ave N
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Fargo **ND** **58102**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Debt

Is the claim subject to offset?

- No
- Yes

4.19

\$418.00

GE Capital Credit
 Nonpriority Creditor's Name
PO Box 960061
 Number Street
Orlando, FL 32896-00661

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

City State ZIP Code
Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

Is the claim subject to offset?

- No
- Yes

4.20

\$9,600.00

Judy Straw
 Nonpriority Creditor's Name
418 5th Ave SE
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Baudette **MN** **56623**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Debt

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.21 **\$1,269.00**

Kohls/CapOne
 Nonpriority Creditor's Name
PO Box 3115
 Number Street

Last 4 digits of account number **2 8 2 5**

When was the debt incurred? **11/24/2011**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Milwaukee WI 53201
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.22 **\$688.42**

Lance Straabe
 Nonpriority Creditor's Name
1305 124th Ave
 Number Street

Last 4 digits of account number **0 6 7 4**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Hope ND 58046
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Judgment**

4.23 **\$557.00**

Prairie Property Management
 Nonpriority Creditor's Name
4675 40th Ave S #110
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Fargo ND 58104
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Debt**

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.24

\$348.00

Progressive

Nonpriority Creditor's Name
24344 Network Place

Number Street

Last 4 digits of account number **_____**

When was the debt incurred? **_____**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Chicago IL 60673

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Debt**

4.25

\$418.00

Sam's Club/Synchrony Bank

Nonpriority Creditor's Name
PO Box 965005

Number Street

Last 4 digits of account number **1 0 7 5**

When was the debt incurred? **8/17/2012**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Orlando FL 32896-5005

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

4.26

\$2,000.00

Siedl Law Offices

Nonpriority Creditor's Name
8A West Davenport St

Number Street
Suite #212

Last 4 digits of account number **_____**

When was the debt incurred? **_____**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Rhineland WI 54501

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Attorney Fees**

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.27

\$1,848.00

SLFC
 Nonpriority Creditor's Name
501 Bleeker St
 Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Utica NY 13501
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify

4.28

\$1,170.00

Sprint
 Nonpriority Creditor's Name
PO Box 4191
 Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Carol Stream IL 60197-4191
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Debt**

4.29

\$1,893.00

Target National Bank
 Nonpriority Creditor's Name
PO Box 673
 Number Street

Last 4 digits of account number **2 1 0 4**

When was the debt incurred? **5/5/2003**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Minneapolis MN 55440
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit Card**

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.30 **\$3,000.00**

Todd Fitzgerald
 Nonpriority Creditor's Name
1400 Florida Ave. N
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Golden Valley **MN** **55422**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Debt

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.31 **\$582.00**

Verizon Wireless
 Nonpriority Creditor's Name
P.O. Box 4002
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Acworth **GA** **30101**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Cellular Phone Service

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.32 **\$562.00**

World Financial Network Bank
 Nonpriority Creditor's Name
3100 Easton Square Place
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Columbus **OH** **43219**
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Debt

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.33

\$557.00

World Financial Network Bank
 Nonpriority Creditor's Name
3100 Easton Square Place
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Columbus OH 43219
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Debt

Is the claim subject to offset?

No
 Yes

4.34

\$176.00

Xcel Energy
 Nonpriority Creditor's Name
PO Box 9477
 Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Minneapolis MN 55484-9417
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Utilities

Is the claim subject to offset?

No
 Yes

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
 First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1st Collection Services

Name 1092 Otter Creek East Blv
 Number Street
Mablevale AR 72103-1661
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Collection Center/Startek

Name 425 N 5th St
 Number Street
Bismarck ND 58501
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Credit Collection Services

Name PO Box 607
 Number Street
Norwood MA 02062
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Diversified Consultants, Inc.

Name PO Box 551268
 Number Street Jacksonville, FL 32255-12686
Great Lakes Higher Education
 Name PO Box 7859
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Madison WI 53707

Last 4 digits of account number _____

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
 First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Jefferson Capital Systems On which entry in Part 1 or Part 2 did you list the original creditor?

Name 16 McLeland Road
 Number Street _____

Line 4.31 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

St. Cloud **MN** **56303** Last 4 digits of account number _____
 City State ZIP Code _____

Messerli & Kramer PA On which entry in Part 1 or Part 2 did you list the original creditor?

Name 3033 Campus Drive, Ste 250
 Number Street _____

Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Plymouth **MN** **55441** Last 4 digits of account number _____
 City State ZIP Code _____

Midland Credit Management Inc On which entry in Part 1 or Part 2 did you list the original creditor?

Name 8875 Aero Dr, Ste 200
 Number Street _____

Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

San Diego **CA** **92123-2255** Last 4 digits of account number _____
 City State ZIP Code _____

Midland Funding On which entry in Part 1 or Part 2 did you list the original creditor?

Name 2365 Northside Drive, Suite 300
 Number Street _____

Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

San Diego **CA** **92108** Last 4 digits of account number _____
 City State ZIP Code _____

Portfolio Recovery Associates On which entry in Part 1 or Part 2 did you list the original creditor?

Name 120 Corporate BLVD
 Number Street _____

Line 4.33 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Norfolk **VA** **23502** Last 4 digits of account number _____
 City State ZIP Code _____

Portfolio Recovery Associates On which entry in Part 1 or Part 2 did you list the original creditor?

Name 120 Corporate BLVD
 Number Street _____

Line 4.32 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Norfolk **VA** **23502** Last 4 digits of account number _____
 City State ZIP Code _____

Debtor 1 **Blake Fitzgerald** Case number (if known) 16-30351
First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Portfolio Recovery Associates On which entry in Part 1 or Part 2 did you list the original creditor?

Name **120 Corporate BLVD**
Number Street _____

Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Norfolk VA 23502 Last 4 digits of account number _____
City State ZIP Code _____

Red River Collections On which entry in Part 1 or Part 2 did you list the original creditor?

Name **1644 Tom Williams Dr S**
Number Street _____

Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Fargo ND 58104-6187 Last 4 digits of account number _____
City State ZIP Code _____

United Accounts Inc On which entry in Part 1 or Part 2 did you list the original creditor?

Name **PO Box 9331**
Number Street _____

Line 4.34 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Fargo ND 58106-9331 Last 4 digits of account number _____
City State ZIP Code _____

United Accounts Inc On which entry in Part 1 or Part 2 did you list the original creditor?

Name **PO Box 9331**
Number Street _____

Line 4.23 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Fargo ND 58106-9331 Last 4 digits of account number _____
City State ZIP Code _____

United Accounts Inc On which entry in Part 1 or Part 2 did you list the original creditor?

Name **PO Box 9331**
Number Street _____

Line 4.18 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Fargo ND 58106-9331 Last 4 digits of account number _____
City State ZIP Code _____

United Accounts Inc On which entry in Part 1 or Part 2 did you list the original creditor?

Name **PO Box 9331**
Number Street _____

Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Fargo ND 58106-9331 Last 4 digits of account number _____
City State ZIP Code _____

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

United Accounts Inc On which entry in Part 1 or Part 2 did you list the original creditor?

Name **PO Box 9331** Line **4.12** of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street Part 2: Creditors with Nonpriority Unsecured Claims

Fargo **ND** **58106-9331** Last 4 digits of account number _____
City State ZIP Code

United Accounts Inc On which entry in Part 1 or Part 2 did you list the original creditor?

Name **PO Box 9331** Line **4.6** of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street Part 2: Creditors with Nonpriority Unsecured Claims

Fargo **ND** **58106-9331** Last 4 digits of account number _____
City State ZIP Code

Virtuoso Sourcing Group On which entry in Part 1 or Part 2 did you list the original creditor?

Name **4500 Cherry Creed S Dr, Suite 300** Line **4.34** of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street Part 2: Creditors with Nonpriority Unsecured Claims

Denver **CO** **80264** Last 4 digits of account number _____
City State ZIP Code

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
 First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	
6a. Domestic support obligations	6a. <u>\$1.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$2,000.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	6d. <u>\$2,001.00</u>

	Total claim
Total claims from Part 2	
6f. Student loans	6f. <u>\$1,848.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$85,880.48</u>
6j. Total. Add lines 6f through 6i.	6j. <u>\$87,728.48</u>

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	<u>Ally</u> Name P.O. Box 380902 Number Street			Leased 2011 Chevy Cruze Contract to be REJECTED
	Bloomington City	MN State	55438-0902 ZIP Code	
2.2	<u>American Honda Finance Corp</u> Name 3625 W Royal Ln, Ste 100 Number Street			Leased 2012 Honda Odyssey Contract to be REJECTED
	Irving City	TX State	75063 ZIP Code	

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2	(Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)
 No
 Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
 No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 No
 Yes
3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 **Kylie Schneider**
Name
4299 Island View Rd
Number Street

Schedule D, line _____

Schedule E/F, line **4.23**

Schedule G, line _____

Prairie Property Management

Rhinelander **WI** **54501**
City State ZIP Code

Schedule D, line _____

Schedule E/F, line **4.22**

Schedule G, line _____

Lance Straabe

3.2 **Kylie Schneider**
Name
4299 Island View Rd
Number Street

Schedule D, line _____

Schedule E/F, line **4.22**

Schedule G, line _____

Rhinelander **WI** **54501**
City State ZIP Code

Debtor 1 **Blake Fitzgerald** Case number (if known) **16-30351**
First Name Middle Name Last Name

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.3

Kylie Schneider
Name
4299 Island View Rd
Number Street

Schedule D, line _____

Schedule E/F, line **4.7**

Schedule G, line _____

Brookstone Property LLC

3.4

Rhinelander
City **WI** State **54501**
ZIP Code

Schedule D, line _____

Schedule E/F, line **4.27**

Schedule G, line _____

SLFC

Todd Fitzgerald
Name
1400 Florida Ave. N
Number Street

Golden Valley
City **MN** State **55422**
ZIP Code

Fill in this information to identify your case:			
Debtor 1	Blake	Fitzgerald	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is:

- An amended filing
- A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	<u>Sales Consultant</u>	
Employer's name	<u>Independent Contractor</u>	
Employer's address	<u>508 19th Ave W, Unit F</u> Number Street	
	<u> </u> <u> </u>	

How long employed there? 2 Months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <u>\$7,500.00</u>	_____
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	_____
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$7,500.00</u>	_____

Debtor 1	First Name	Middle Name	Last Name	Case number (if known)	16-30351
			Fitzgerald		
				For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here			→ 4.	\$7,500.00	
5. List all payroll deductions:			5a.	\$1,147.50	
5b. Mandatory contributions for retirement plans			5b.	\$0.00	
5c. Voluntary contributions for retirement plans			5c.	\$0.00	
5d. Required repayments of retirement fund loans			5d.	\$0.00	
5e. Insurance			5e.	\$0.00	
5f. Domestic support obligations			5f.	\$550.00	
5g. Union dues			5g.	\$0.00	
5h. Other deductions. Specify: _____			5h. +	\$0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.			6.	\$1,697.50	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.			7.	\$5,802.50	
8. List all other income regularly received:			8a.	\$0.00	
8a. Net income from rental property and from operating a business, profession, or farm			8b.	\$0.00	
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			8c.	\$0.00	
8b. Interest and dividends			8d.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive			8e.	\$0.00	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			8f.	\$0.00	
8d. Unemployment compensation			8g.	\$0.00	
8e. Social Security			8h.	\$0.00	
8f. Other government assistance that you regularly receive			8h. +	\$0.00	
Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			9.	\$0.00	
Specify: _____			10.	\$5,802.50	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.			+ _____	= _____	\$5,802.50
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.					
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.					
Specify: Mothers Payment for Accord			11. +	\$325.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.			12.	\$6,127.50	
13. Do you expect an increase or decrease within the year after you file this form?					
<input checked="" type="checkbox"/> No.	None.				
<input type="checkbox"/> Yes. Explain:					

Fill in this information to identify your case:

Debtor 1	Blake First Name	Fitzgerald Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. **Does Debtor 2 live in a separate household?**
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son	10	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Son	5	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Son	2	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. 4. **\$1,595.00**

Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

4a. Real estate taxes

4a.

4b. Property, homeowner's, or renter's insurance

4b.

4c. Home maintenance, repair, and upkeep expenses

4c.

\$100.00

4d. Homeowner's association or condominium dues

4d.

Debtor 1	Blake First Name	Fitzgerald Middle Name	Last Name	Case number (if known)	16-30351
Your expenses					
5.	Additional mortgage payments for your residence , such as home equity loans				5. _____
6.	Utilities:				
6a.	Electricity, heat, natural gas				6a. _____
6b.	Water, sewer, garbage collection				6b. _____
6c.	Telephone, cell phone, Internet, satellite, and cable services				6c. _____ \$75.00
6d.	Other. Specify: <u>Cell Phone</u>				6d. _____ \$110.00
7.	Food and housekeeping supplies				7. _____ \$631.00
8.	Childcare and children's education costs				8. _____
9.	Clothing, laundry, and dry cleaning				9. _____ \$89.00
10.	Personal care products and services				10. _____ \$64.00
11.	Medical and dental expenses				11. _____ \$260.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.				12. _____ \$250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books				13. _____ \$100.00
14.	Charitable contributions and religious donations				14. _____
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.				
15a.	Life insurance				15a. _____
15b.	Health insurance				15b. _____ \$750.00
15c.	Vehicle insurance				15c. _____ \$250.00
15d.	Other insurance. Specify: _____				15d. _____
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____				16. _____
17.	Installment or lease payments:				
17a.	Car payments for Vehicle 1 Honda Accord Payment				17a. _____ \$325.00
17b.	Car payments for Vehicle 2				17b. _____
17c.	Other. Specify: _____				17c. _____
17d.	Other. Specify: _____				17d. _____
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).				18. _____
19.	Other payments you make to support others who do not live with you. Specify: _____				19. _____

Debtor 1	Blake First Name	Fitzgerald Middle Name	Case number (if known)	16-30351
----------	----------------------------	----------------------------------	-------------------------------	-----------------

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: Gas for traveling for work

21. + **\$550.00**

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.	22a. _____
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. \$5,149.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____
23b. Copy your monthly expenses from line 22c above.	23b. - _____
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$978.50

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Debtor anticipates obtaining health insurance for himself and 3 minor children. He was quoted approximately \$750.00.

Debtor 1 Blake _____ Case number (if known) 16-30351
First Name Middle Name Last Name

11. Medical and dental (details):

Prescriptions	\$60.00
Medical & Dental	\$200.00
Total:	\$260.00

Fill in this information to identify your case:

Debtor 1	<u>Blake</u> First Name	<u></u> Middle Name	<u>Fitzgerald</u> Last Name
Debtor 2 (Spouse, if filing)	<u></u> First Name	<u></u> Middle Name	<u></u> Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NORTH DAKOTA</u>			
Case number (if known)	<u>16-30351</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Blake Fitzgerald

Blake Fitzgerald, Debtor 1

Date 07/27/2016

MM / DD / YYYY

X

Signature of Debtor 2

Date

MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name	
	Blake		Fitzgerald	
Debtor 2	(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA				
Case number (if known)	<u>16-30351</u>			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<u>522 Arrowwood Dr</u> Number Street	From <u>6/2015</u> To <u>3/2015</u>	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
<u>Horace</u> City	State ZIP Code	City	State ZIP Code
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<u>911 East King Road</u> Number Street	From <u>8/2009</u> To <u>3/2011</u>	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
<u>Tomahawk</u> City	State ZIP Code	City	State ZIP Code

Debtor 1	Blake First Name	Fitzgerald Middle Name	Case number (if known) 16-30351
Last Name			
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
1711 41st Ave S Number Street		From 1/2015 To 6/2015	From _____ To _____
Moorhead City		MN 56560 State ZIP Code	City _____ State ZIP Code _____
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
1719 Huntington Dr Number Street		From 8/2014 To 1/2015	From _____ To _____
West Fargo City		ND 58078 State ZIP Code	City _____ State ZIP Code _____
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
79 Evergreen Circle Number Street		From 5/2014 To 8/2014	From _____ To _____
West Fargo City		ND 58078 State ZIP Code	City _____ State ZIP Code _____
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
4267 51st St S Number Street		From 4/2012 To 8/2014	From _____ To _____
Fargo City		ND 58078 State ZIP Code	City _____ State ZIP Code _____
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
862 36th Ave E #302 Number Street		From 4/2011 To 3/2012	From _____ To _____
West Fargo City		ND 58078 State ZIP Code	City _____ State ZIP Code _____

Debtor 1 **Blake Fitzgerald** Case number (if known) 16-30351

First Name Middle Name Last Name

3. **Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**
 (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

4. **Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$30,010.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the last calendar year: (January 1 to December 31, <u>2015</u>) <u>YYYY</u>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$163,153.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2014</u>) <u>YYYY</u>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$127,746.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. **Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

Debtor 1 **Blake Fitzgerald** Case number (if known) 16-30351
 First Name Middle Name Last Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Gate City Bank Creditor's name		\$309.73	\$4,154.23	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
500 2nd Ave N Number Street				
Fargo City	ND State	58103 ZIP Code		

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Megan Gerszewski Insider's name	\$550/month	\$6,600.00		Court Ordered Child Support
209 2nd Ave Number Street				
Viking City	MN State	56760 ZIP Code		

Debtor 1 **Blake Fitzgerald** Case number (if known) 16-30351
 First Name Middle Name Last Name

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Case title State of Minnesota vs Blake Fitzgerald	Nature of the case Crim/Traf Mandatory	Court or agency County of Clay, State of Minnesota	Status of the case <input type="checkbox"/> Pending
Case number <u>14-CR-15-04095</u>		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input checked="" type="checkbox"/> Concluded
		City State ZIP Code	
Case title Brookstone Property LLC vs Blake Fitzgerald, et al.	Nature of the case Collection	Court or agency County of Cass, State of North Dakota	Status of the case <input type="checkbox"/> Pending
Case number <u>09-2014-cv-00923</u>		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input checked="" type="checkbox"/> Concluded
		City State ZIP Code	
Case title Lance Straabe vs Blake Fitzgerald, et al.	Nature of the case Collection	Court or agency County of Cass, State of North Dakota	Status of the case <input type="checkbox"/> Pending
Case number <u>09-2014-SC-00674</u>		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input checked="" type="checkbox"/> Concluded
		City State ZIP Code	
Case title Affinity Plus Federal Credit Union vs Blake Fitzgerald	Nature of the case Collection	Court or agency County of Cass, State of North Dakota	Status of the case <input type="checkbox"/> Pending
Case number <u>09-2015-CV-02744</u>		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input checked="" type="checkbox"/> Concluded
		City State ZIP Code	

Debtor 1	Blake First Name	Fitzgerald Middle Name	Fitzgerald Last Name	Case number (if known) <u>16-30351</u>
Case title	Nature of the case		Court or agency	Status of the case
Chad Gibbon and Jaquelyn Gibbon vs Blake Fitzgerald	Collection		County of Cass, State of North Dakota Court Name	<input type="checkbox"/> Pending
Case number	<u>09-2016-SC-00458</u>		Number Street	<input type="checkbox"/> On appeal
				<input checked="" type="checkbox"/> Concluded
			City	State ZIP Code
Case title	Nature of the case		Court or agency	Status of the case
Blake Fitzgerald vs Kylie Schneider	Custody		County of Cass, State of North Dakota Court Name	<input checked="" type="checkbox"/> Pending
Case number			Number Street	<input type="checkbox"/> On appeal
				<input type="checkbox"/> Concluded
			City	State ZIP Code
Case title	Nature of the case		Court or agency	Status of the case
State of Wisconsin vs Blake Fitzgerald	Disorderly Conduct/Resisting Arrest		District Court Court Name	<input checked="" type="checkbox"/> Pending
Case number			Number Street	<input type="checkbox"/> On appeal
				<input type="checkbox"/> Concluded
			City	State ZIP Code
Case title	Nature of the case		Court or agency	Status of the case
State of Wisconsin vs Blake Fitzgerald	Violation of Protection Order		District Court Court Name	<input checked="" type="checkbox"/> Pending
Case number			Number Street	<input type="checkbox"/> On appeal
				<input type="checkbox"/> Concluded
			City	State ZIP Code

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.
 Yes. Fill in the information below.

Affinity Plus Federal Credit Union Creditor's Name	Describe the property paycheck	Date <u>6-10-2106</u>	Value of the property <u>\$3,676.25</u>
175 Lafayette Rd Number Street	Explain what happened		
	<input type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
Saint Paul City	<input checked="" type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
 First Name Middle Name Last Name

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed \$10,000 Donation	Date you contributed 2015	Value \$10,000.00
---	--	---------------------------------	----------------------

Prairie Heights Community Church
 Charity's Name

319 32nd Ave E
 Number Street

West Fargo ND 58078
 City State ZIP Code

Gifts or contributions to charities that total more than \$600	Describe what you contributed \$6,000 Donation	Date you contributed 2014	Value \$6,000.00
---	---	---------------------------------	---------------------

Prairie Heights Community Church
 Charity's Name

319 32nd Ave E
 Number Street

West Fargo ND 58078
 City State ZIP Code

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment made
<u>Madlom Law Office</u> Person Who Was Paid			
<u>1330 Gateway Drive S.W.</u> Number Street		<u>07/27/2016</u>	<u>\$1,000.00</u>
<u>P.O. Box 9693</u>			
<u>Fargo</u> City	<u>ND</u> <u>58106-9693</u> State ZIP Code		

Email or website address

Person Who Made the Payment, if Not You

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Debtor 1 **Blake Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
---------------------------------	-------------------------------	--	---

Gate City

Name of Financial Institution

500 2nd Ave N

Number Street

XXXX- 0 3 3 0

Checking
 Savings
 Money market
 Brokerage
 Other

4/1/2016

\$73.16

Fargo **ND** **58103**

City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?	Describe the property	Value
------------------------	-----------------------	-------

Minor Children

Owner's Name

508 19th Ave W Unit F

Number Street

508 19th Ave W Unit F

Number Street

Television, Bed (3), Wearing apparel, Assorted Baseball Cards and Autographed Baseballs (7)

\$1,100.00

West Fargo **ND** **58078**

City State ZIP Code

West Fargo **ND** **58078**

City State ZIP Code

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.
 Yes. Check all that apply above and fill in the details below for each business.

Blake Fitzgerald
Business Name

Describe the nature of the business
independent contractor

Employer Identification number
Do not include Social Security number or ITIN.

508 19th Ave W Unit F
Number Street

Name of accountant or bookkeeper

EIN: _____

West Fargo ND 58078
City State ZIP Code

Dates business existed

From 3/2016 To _____

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Blake Fitzgerald
Blake Fitzgerald, Debtor 1

X _____
Signature of Debtor 2

Date 07/27/2016

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

Chapter 7: Liquidation

\$245	filin g fee
\$75	administrative fee
+	\$15 trustee surcharge
	\$335 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form--sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filings fee
+	\$550 administrative fee
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+ \$75	administrative fee
<hr/>	
\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+ \$75	administrative fee
<hr/>	
\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

A married couple may file a bankruptcy case together--called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NORTH DAKOTA
FARGO DIVISION

In re **Blake Fitzgerald**

Case No. 16-30351

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u>\$3,500.00</u>
Prior to the filing of this statement I have received.....	<u>\$1,000.00</u>
Balance Due.....	<u>\$2,500.00</u>

2. The source of the compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/27/2016

Date

/s/ Bruce L. Madlom

Bruce L. Madlom
Madlom Law Office
1330 Gateway Dr. S.W.
P.O. Box 9693
Fargo, ND 58106-9693
Phone: (701) 235-0505 / Fax: (701) 234-9509

Bar No. 04716

Fill in this information to identify your case:			Check as directed in lines 17 and 21:
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		
<input type="checkbox"/> 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). <input checked="" type="checkbox"/> 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). <input type="checkbox"/> 3. The commitment period is 3 years. <input checked="" type="checkbox"/> 4. The commitment period is 5 years.			

Official Form 122C-1

**Chapter 13 Statement of Your Current Monthly Income
and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.
 Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$7,786.14	_____
3. Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	_____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$0.00	_____
5. Net income from operating a business, profession, or farm		

	Debtor 1	Debtor 2	
Gross receipts (before all deductions)	\$0.00	_____	
Ordinary and necessary operating expenses	— \$0.00	— _____	
Net monthly income from a business, profession, or farm	\$0.00	_____	Copy here → \$0.00

Debtor 1 **Blake** **Fitzgerald** Case number (if known) **16-30351**
 First Name Middle Name Last Name

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
------------------------------------	---

6. Net income from rental and other real property

Debtor 1	Debtor 2
-----------------	-----------------

Gross receipts (before all deductions)	\$0.00	
Ordinary and necessary operating expenses	\$0.00	
Net monthly income from rental or other real property	\$0.00	Copy here → \$0.00

7. Interest, dividends, and royalties

\$0.00	
---------------	--

8. Unemployment compensation

\$0.00	
---------------	--

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: **↓**

For you..... **\$0.00**

For your spouse.....

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$0.00	
---------------	--

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

11. Calculate your total average monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

+	\$7,786.14	+	\$7,786.14	= \$7,786.14
----------	-------------------	----------	-------------------	---------------------

Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. **\$7,786.14**

13. Calculate the marital adjustment. Check one:

- You are not married. Fill in 0 below.
- You are married and your spouse is filing with you. Fill in 0 below.
- You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

Total.....	\$0.00	Copy here →	- \$0.00
-------------------	---------------	--------------------	-----------------

14. Your current monthly income. Subtract the total in line 13 from line 12.

\$7,786.14

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here → \$7,786.14

Multiply line 15a by 12 (the number of months in a year). X 12

15b. The result is your current monthly income for the year for this part of the form. \$93,433.68

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. North Dakota

16b. Fill in the number of people in your household. 4

16c. Fill in the median family income for your state and size of household. \$84,606.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).

17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11. \$7,786.14

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. — \$0.00

19b. **Subtract line 19a from line 18.** \$7,786.14

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b \$7,786.14

Multiply by 12 (the number of months in a year). X 12

20b. The result is your current monthly income for the year for this part of the form. \$93,433.68

20c. Copy the median family income for your state and size of household from line 16c. \$84,606.00

21. How do the lines compare?

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
First Name Middle Name Last Name

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Blake Fitzgerald
Blake Fitzgerald, Debtor 1

X _____
Signature of Debtor 2

Date 7/27/2016
MM / DD / YYYY

Date _____
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2	(Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA			
Case number (if known)	16-30351		

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. **\$1,509.00**

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person	\$54.00
7b. Number of people who are under 65	X 4
7c. Subtotal. Multiply line 7a by line 7b.	\$216.00

Copy here →

\$216.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person	\$130.00
7e. Number of people who are 65 or older	X 0
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00
7g. Total. Add lines 7c and 7f.....	\$216.00

Copy here →

\$0.00

Copy here →

\$216.00

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
 First Name Middle Name Last Name

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- **Housing and utilities -- Insurance and operating expenses**
- **Housing and utilities -- Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities -- Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. **\$560.00**

9. **Housing and utilities -- Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. **\$1,322.00**

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
----------------------	-------------------------

_____ + _____
 _____ + _____

9b. Total average monthly payment **\$0.00**

Copy here →

\$0.00

Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$1,322.00

Copy here →

\$1,322.00

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** _____

Explain why: _____

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
- 1. Go to line 12.
- 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. **\$382.00**

Debtor 1 Blake Fitzgerald Case number (if known) 16-30351
 First Name Middle Name Last Name

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 **Describe Vehicle 1:** Leased Chevrolet Cruze

13a. Ownership or leasing costs using IRS Local Standard. \$471.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
-------------------------------------	-------------------------

<u>Ally</u>	<u>\$192.12</u>
<u>Gate City Bank</u>	<u>\$69.24</u>

Total average monthly payment

\$261.36

Copy here →

\$261.36

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense.

Subtract line 13b from line 13a. If this number is less than \$0, enter \$0.

\$209.64

\$209.64

Copy net Vehicle 1 expense here →

Vehicle 2 **Describe Vehicle 2:** Leased Honda Odyssey

13d. Ownership or leasing costs using IRS Local Standard. \$471.00

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
-------------------------------------	-------------------------

<u>American Honda Finance Corp</u>	<u>\$533.88</u>
------------------------------------	-----------------

Total average monthly payment

\$533.88

Copy here →

\$533.88

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense.

Subtract line 13e from 13d. If this number is less than \$0, enter \$0.

\$0.00

\$0.00

Copy net Vehicle 2 expense here →

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation. \$0.00

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15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation. \$0.00

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.
Do not include real estate, sales, or use taxes. \$1,264.87

17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$0.00

18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.
Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$0.00

19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. \$384.55

20. Education: The total monthly amount that you pay for education that is either required:
■ as a condition for your job, or
■ for your physically or mentally challenged dependent child if no public education is available for similar services. \$0.00

21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.
Do not include payments for any elementary or secondary school education. \$0.00

22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.
Payments for health insurance or health savings accounts should be listed only in line 25. \$0.00

23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. \$0.00

24. Add all of the expenses allowed under the IRS expense allowances.

Add lines 6 through 23. \$5,848.06

Additional Expense Deductions These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-24.

25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance	<u>\$0.00</u>
Disability insurance	<u>\$0.00</u>
Health savings account	<u>\$0.00</u>
Total	<u>\$0.00</u>

Copy total here → \$0.00

Do you actually spend this total amount?

No. How much do you actually spend? _____
 Yes

26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). \$0.00

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27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential. \$0.00

28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. \$0.00

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). + \$0.00

Do not include any amount more than 15% of your gross monthly income.

32. Add all of the additional expense deductions. Add lines 25 through 31. \$0.00

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Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

		Average monthly payment
Mortgages on your home		
33a.	Copy line 9b here.....	→ <u>\$0.00</u>
Loans on your first two vehicles		
33b.	Copy line 13b here.....	→ <u>\$261.36</u>
33c.	Copy line 13e here.....	→ <u>\$533.88</u>
33d.	List other secured debts:	

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?
_____	_____	<input type="checkbox"/> No _____ <input type="checkbox"/> Yes _____
_____	_____	<input type="checkbox"/> No _____ <input type="checkbox"/> Yes _____
_____	_____	<input type="checkbox"/> No _____ + _____ <input type="checkbox"/> Yes _____
33e. Total average monthly payment. Add lines 33a through 33d.....		<u>\$795.24</u> Copy total here → <u>\$795.24</u>

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

No. Go to line 35.
 Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
_____	_____	÷ 60 = _____	_____
_____	_____	÷ 60 = _____	_____
_____	_____	÷ 60 = + _____	_____
Total		<u>\$0.00</u>	Copy total here → <u>\$0.00</u>

35. Do you owe any priority claims--such as a priority tax, child support, or alimony--that are past due as of the filing date of your bankruptcy case?
 11 U.S.C. § 507.

No. Go to line 36.
 Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims..... \$2,001.00 ÷ 60 = \$33.35

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36. Projected monthly Chapter 13 plan payment \$1,938.08

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

6.8 %

Average monthly administrative expense

\$131.79

Copy total
here →

\$131.79

\$960.38

37. Add all of the deductions for debt payment.

Add lines 33g through 36.

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances..... \$5,848.06

Copy line 32, All of the additional expense deductions..... \$0.00

Copy line 37, All of the deductions for debt payment..... \$960.38

Total deductions \$6,808.44

Copy total
here →

\$6,808.44

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. \$7,786.14

40. Fill in any reasonably necessary income you receive for support of dependent children.

The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part 1 of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.

41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$0.00

42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here..... → \$6,808.44

43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
_____	_____
_____	_____
_____	_____
+	
Total	<u><u>\$0.00</u></u>
	Copy here → + <u><u>\$0.00</u></u>

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44. Total adjustments. Add lines 40 through 43..... \$6,808.44 Copy here → \$6,808.44

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.

\$977.70

Part 3: Change in Income or Expenses

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Blake Fitzgerald
Blake Fitzgerald, Debtor 1

X _____
Signature of Debtor 2

Date 7/27/2016
MM / DD / YYYY

Date _____
MM / DD / YYYY